

Joint MPH Program

University of Gondar and Addis Continental Institute of Public Health

**Assessment of Palliative Care Approach to HIV/AIDS Clients and Their
Family Care Givers, Tigray Region**

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List of abbreviations

AIDS	Acquired Immunodeficiency Disease Syndrome
ART	Antiretroviral Therapy
AZT	Zidovudin
BMI	Body mass index
CPT	Cotrimoxazole Prophylactic Therapy
DACA	Drug Administration and Control Authority
d4T	Stavudine
FHAPCO	Federal HIV/AIDS Prevention and Control Office
HAART	Highly Active Antiretroviral Therapy
HCWs	Health Care Workers
HIV	Human Immunodeficiency Virus
I-TECH	International Training and Education Center on HIV
ITN	Insecticide Treated Bed Net
INH	Isoniazid
IPT	Isoniazid prophylaxis therapy
MOHE	Ministry of Health Ethiopia
NGO	Non Governmental Organizations
NVP	Nevirapin
OI	Opportunistic Infections
pCTX	Intermittent Presumptive Cotrimoxazole Treatment
PEPFAR	President's Emergency Plan for AIDS Relief
PWHA	People with HIV AIDS
PWP	Prevention with Positives
STI	Sexually Transmitted Infections
TRHB	Tigray Regional Health Bureau
WHO	World Health Organization

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Abstract

Background: Palliative care in the context of HIV is a broad and new concept which begins with the HIV-positive diagnosis and extends through the end of life. The goal of palliative care is improving quality of life of PWHA and their family care givers. Palliative care approaches involves five components; clinical, psychological, targeted preventive therapies, social and spiritual care. In Ethiopia Palliative Care at programmatic care level is introduced in the existing HIV care services very recently. TRHB, in collaboration with I-TECH Ethiopia initiated Palliative Care within the existing HIV care services since 2006 GC. Findings of this study will help in standardizing and scale up of the existing Palliative care service provision **Objective:** is to assess the current health facility based Palliative Care approaches for PWHA and their family caregivers in 12 ART/ Palliative Care providing hospitals in Tigray region.

Methods: A cross - sectional descriptive study conducted between the periods from April, 2008 – June, 2009. Clinical records of 384 adult PWHA in HIV care reviewed, 387 clinician's perception of palliative care measured using Likert scale and availability of basic palliative care supply assessed.

Result: Findings indicated that underlying causes of symptoms treated for 60-82.9% of clients with fever, weight loss or wasting, chronic fatigue, GI symptoms, and cough. Pain prevalence was 15.1% and 40(69%) received pharmacologic management. Few clients developed drug toxicities and one third up to 100 % treated. Laboratory and clinical monitoring was done for 80 -98.7% of clients. CPT, Wuha Agar and condom were provided for 80%, 56.5% and 54.2% of the clients, respectively. Partner 42(10.9%) and children 26(5%) tested for HIV. Psychosocial support provision was very poor. The spiritual care provision was also alarmingly undervalued. About two third (65.4%) of clinicians had poor perceptions of palliative care.

Conclusion and Recommendation: Generally there is a promising ground to strengthen and scale up palliative care services at national level. Individual HIV clinical record review, uninterrupted palliative care supplies, training of more clinicians on palliative care, strengthening care coordination between hospital, community and home based palliative care services and developing National Palliative Care Guideline considering care for care givers is recommended.

